

APPLICATION FOR A NEVADA GAMING LICENSE

(To be typewritten or printed legibly and filed in duplicate.)

A. NAME OF APPLICANT _____

Name of Gaming Establishment Federal Tax I.D. No. _____

Physical Address of Gaming Establishment

Mailing Address _____

B. If location has previously been licensed, please indicate former name.

C. Individual Applicants: (Include name, percentage of interest, and/or position.)

Attach additional sheet if necessary

D. TYPE OF LICENSE: ☐ Restricted (1-15 devices only) ☐ Nonrestricted (over 15 devices and/or live gaming)

E. PLEASE MARK APPROPRIATE NUMBER(S):

1. ☐ New License at Location (Proposed date of opening _____)

2. ☐ Application for Interest in Existing License: _____% / Number of shares/units _____

Purchased From: ☐ Treasury ☐ Individual ☐ Other _____
(Please specify)

3. ☐ Officer ☐ Director ☐ Key Employee _____
Title(s)

Written Employment Agreement: ☐ Yes ☐ No (If yes, attach a copy of the agreement.)

4. ☐ Slot Route Operator (Do Not Check if Space Lease Application)

5. ☐ Manufacturer

6. ☐ Distributor

7. ☐ Finding of Suitability: ☐ Lender ☐ Landlord ☐ Other _____
(Please specify)

8. ☐ Other: (Please specify) _____

F. **NOTE: If this application is for 2, 3, or 7, signature of a present licensee is required:**

Signature

Name (Print) Title

G. Breakdown of Games and Gaming Devices. **To be completed when the application is for a new location:**

GAMES	NO.	TABLES	NO.	GAMING DEVICES	NO.
Craps	_____	Panguingui	_____	5¢	_____
Roulette	_____	Poker	_____	10¢	_____
Twenty-one	_____	Other (describe):	_____	25¢	_____
Keno	_____	_____	_____	50¢	_____
Bingo.....	_____	_____	_____	\$1	_____
Wheel of Fortune	_____	_____	_____	\$5	_____
Baccarat.....	_____	_____	_____	\$25	_____
Pai Gow	_____	_____	_____	\$100	_____
Race Book	_____	_____	_____	Multi-denominational	_____
Pari-Mutuel? (Yes/No)	_____	_____	_____	Other (describe):	_____
Sports Pool	_____	_____	_____	_____	_____
Pari-Mutuel? (Yes/No)	_____	_____	_____	_____	_____
Other (describe):	_____	_____	_____	_____	_____
TOTAL.....	_____	TOTAL	_____	TOTAL	_____

Progressive Slots Total _____

H. FEE(S) TO ACCOMPANY THIS APPLICATION:

STATE (To be paid to Nevada Gaming Control Board):

- (a) Restricted Application - \$150 per applicant and/or entity, plus appropriate investigative fee
- (b) Nonrestricted Application - \$500 per applicant and/or entity

COUNTY:

CITY:

NOTE: APPROPRIATE BACK-UP MATERIAL MUST ACCOMPANY THIS APPLICATION TO STATE, CITY, AND/OR COUNTY, WHERE APPLICABLE.

STATE OF _____ }
COUNTY OF _____ } ss.

I, _____, being duly sworn, depose and say that the above
Applicant's Name

statements are true and correct to the best of my knowledge and belief and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a gaming license by a municipality, or by a county or by the State of Nevada. Further, that I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the revocation of a gaming license. Further, that I am voluntarily submitting this application under oath with full knowledge that the Gaming Control Act (NRS 463.140(5)) provides that "Any person making false oath in any matter before either the board or commission is guilty of perjury." I am voluntarily submitting this application under oath with full knowledge that I may be required to submit this application to appropriate municipal and county authorities charged by law with granting gaming licenses.

APPLICANT _____
Signature

SUBSCRIBED AND SWORN TO BEFORE ME

THIS _____ DAY OF _____, _____

Notary Public

NOTICE
THIS APPLICATION MAY NOT BE WITHDRAWN WITHOUT THE
PERMISSION OF THE LICENSING AGENCY